

UTILITY PATENT APPLICATION TRANSMITTAL

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ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450		Attorney Docket No. 2265 First Named Inventor James M. Hayes et al. Express Mail No. EV333549575US
APPLICATION ELEMENTS		ACCOMPANYING APPLICATION PARTS
1. <input checked="" type="checkbox"/> Transmittal Form 2. <input checked="" type="checkbox"/> Specification (including claims and abstract) [Total Pages 31] 3. <input checked="" type="checkbox"/> Drawings [Total Sheets 3] 4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed b. <input type="checkbox"/> Copy from prior application [Note Boxes 5 and 18 below] i. <input type="checkbox"/> <u>Deletion of Inventor(s)</u> Signed statement attached deleting inventor(s) named in the prior application 5. <input type="checkbox"/> Incorporation by Reference: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. 6. <input type="checkbox"/> Computer Code Listing (See 1.96) a. <input type="checkbox"/> Microfiche Appendix b. <input type="checkbox"/> CD-Rom (in duplicate, with separate transmittal) 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy c. <input type="checkbox"/> Statement verifying above copies 8. <input type="checkbox"/> Small Entity Status <input type="checkbox"/> is claimed <input type="checkbox"/> Statement filed in prior application; status still proper and desired <input type="checkbox"/> is no longer claimed.		9. <input checked="" type="checkbox"/> Assignment Papers 10. <input checked="" type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) <input checked="" type="checkbox"/> PTO-1449 Form <input checked="" type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) 16. <input checked="" type="checkbox"/> A Request for non-publication pursuant to 35 U.S.C. § 122(b)(2)(B)(i) 17. <input type="checkbox"/> Other:
18. <input type="checkbox"/> This is a CONTINUING APPLICATION. Please note the following: a. <input type="checkbox"/> This is a <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part of prior application b. <input type="checkbox"/> Cancel in this application original claims of the prior application before calculating the filing fee. (At least one claim must remain.) c. <input type="checkbox"/> Amend the specification by inserting before the first line the sentence: This is a <input type="checkbox"/> continuation <input type="checkbox"/> divisional <input type="checkbox"/> continuation-in-part of application Serial No. d. <input type="checkbox"/> The prior application is assigned of record to		

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Attorney Docket No. 2265

APPLICATION FEES				
BASIC FEE				\$ 750.00
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	
Total Claims	21 - 20=	1	x \$18.00	\$ 18.00
Independent Claims	5 - 3=	2	x \$84.00	\$ 168.00
<input type="checkbox"/> Multiple Dependent Claims(s) if applicable			+\$280.00	\$
			Total of above calculations =	\$ 936.00
			Reduction by 50% for filing by small entity =	\$()
<input checked="" type="checkbox"/> Assignment fee if applicable			+\$40.00	\$ 40.00
			TOTAL =	\$ 976.00

19. Please charge my Deposit Account No. 210765 in the amount of \$976.00.

20. A check in the amount of \$ is enclosed.

21. The Commissioner is hereby authorized to credit overpayments or charge any additional fees of the following types to Deposit Account No. 210765:

- Fees required under 37 CFR 1.16.
- Fees required under 37 CFR 1.17.
- Fees required under 37 CFR 1.18.

22. The Commissioner is hereby generally authorized under 37 CFR 1.136(a)(3) to treat any future reply in this or any related application filed pursuant to 37 CFR 1.53 requiring an extension of time as incorporating a request therefor, and the Commissioner is hereby specifically authorized to charge Deposit Account No. 210765 for any fee that may be due in connection with such a request for an extension of time.

23. CERTIFICATE OF MAILING

I hereby certify that, under 37 CFR § 1.10, I directed that the correspondence identified above be deposited with the United States Postal Service as "Express Mail Post Office to Addressee," addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on the date indicated below.

24. USPTO CUSTOMER NUMBER

28005

Sprint Corporation

25. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name	Lawrence H. Aaronson
Reg. No.	36,818
Signature	
Date	September 12, 2003

UTIL (Rev. 11/21/00)

REQUEST AND CERTIFICATION UNDER 35 U.S.C. 122(b)(2)(B)(i)	Attorney Docket No. 2265 First Named Inventor James M. Hayes et al. Express Mail Label No. EV333549575US
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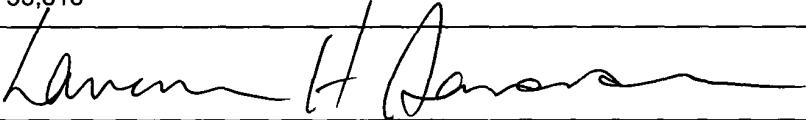
I hereby certify that the invention disclosed in the attached application **has not been and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing. I hereby request that the attached application not be published under 35 U.S.C. 122(b).

USPTO CUSTOMER NUMBER

28005

Sprint Corporation

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name	Lawrence H. Aaronson
Reg. No.	35,818
Signature	
Date	September 12, 2003